## MARYLAND DEPARTMENT OF HEALTH OFFICE OF PROCUREMENT AND SUPPORT SERVICES DETERMINATION OF SOLE SOURCE PROCUREMENT OF SERVICES

Type of Service:	OPASS #:	
Requesting Facility or Administration:		
Contract Cost: Actual	Estimated 🗌	****
Contractor:		
Contract Term:		
Justification:		
In accordance with COMAR section 21.05. determined that the procurement ide procurement.		
Facility Superintendent or Director Headquarters Program Administrator		
	(Signature)	
	(Title)	(Date)
Dana Dembrow MDH – Director of Procurement		
- Midit – Director of Procurement	(Signature)	(Date)
Designee of the Secretary, MDH		
200.g. ice of the bestetting, Mibri	(Signature)	
	(Date)	
Submit this form to the Office of Dragurom		

Submit this form to the Office of Procurement and Support Services as directed on the Contract Cover Sheet.